



## Complete Summary

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### TITLE

End stage renal disease (ESRD): percentage of patients aged 18 years and older with a diagnosis of ESRD receiving peritoneal dialysis who have a Kt/V greater than or equal to 1.7 OR patients who have a Kt/V less than 1.7 with a documented plan of care for inadequate peritoneal dialysis at least three times during the 12 month reporting period.

### SOURCE(S)

Renal Physicians Association, Physician Consortium for Performance Improvement. End stage renal disease (ESRD) physician performance measurement set. Chicago (IL): American Medical Association; 2007 Mar 9. 27 p. [8 references]

## Measure Domain

### PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients aged 18 years and older with a diagnosis of end stage renal disease (ESRD) receiving peritoneal dialysis who have dialyzer clearance/volume ratio (Kt/V) greater than or equal to 1.7 OR patients who have a Kt/V less than 1.7 with a documented plan for inadequate peritoneal dialysis at least three times during the 12 month reporting period.

### RATIONALE

Patients receiving peritoneal dialysis must be monitored (by assessing dialyzer clearance/volume ratio [Kt/V]) regularly to ensure that their dialysis dose is sufficient. A patient receiving peritoneal dialysis whose Kt/V level is less than 1.7 is not receiving optimal dialysis. This measure assesses whether the treating physician addressed the low Kt/V level. A plan of care (may include assessing for non-adherence with the peritoneal prescription, sampling, and collection; assessing for error in the peritoneal dialysis prescription and/or inadequate monitoring of the delivered dose; performing peritoneal equilibrium testing; assessing for inadequate patient education; increasing the exchange volume; or increasing the number of exchanges per 24 hours) should be documented by the physician for every time Kt/V is less than 1.7.\*

\*The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

Total solute clearance (residual kidney and peritoneal, in terms of Kt/V<sub>urea</sub>) should be measured within the first month after initiating dialysis therapy and at least once every 4 months thereafter. (National Kidney Foundation [NKF], 2006)

For patients with residual kidney function (RKF) (considered to be significant when urine volume is > 100 mL/d): The minimal "delivered" dose of total small-solute clearance should be a total (peritoneal and kidney) Kt/V<sub>urea</sub> of at least 1.7 per week). For patients without RKF (considered insignificant when urine volume is less than or equal to 100 mL/d): The minimal "delivered" dose of total small-solute clearance should be a peritoneal Kt/V<sub>urea</sub> of at least 1.7 per week measured within the first month after starting dialysis therapy and at least once every 4 months thereafter. (NKF, 2006)

## **PRIMARY CLINICAL COMPONENT**

End stage renal disease; peritoneal dialysis; Kt/V--dialyzer clearance/volume ratio; plan of care

## **DENOMINATOR DESCRIPTION**

All patients aged 18 years and older with a diagnosis of end stage renal disease (ESRD) receiving peritoneal dialysis

## **NUMERATOR DESCRIPTION**

Patients who have a dialyzer clearance/volume ratio (Kt/V) greater than or equal to 1.7 OR patients who have a Kt/V less than 1.7 with a documented plan of care for inadequate peritoneal dialysis at least three times during the 12 month reporting period

## **Evidence Supporting the Measure**

## **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

## **NATIONAL GUIDELINE CLEARINGHOUSE LINK**

- [NKF-KDOQI clinical practice guidelines for peritoneal dialysis adequacy: update 2006.](#)

### **Evidence Supporting Need for the Measure**

#### **NEED FOR THE MEASURE**

Unspecified

### **State of Use of the Measure**

#### **STATE OF USE**

Current routine use

#### **CURRENT USE**

Internal quality improvement  
National reporting

### **Application of Measure in its Current Use**

#### **CARE SETTING**

Ambulatory Care  
Physician Group Practices/Clinics

#### **PROFESSIONALS RESPONSIBLE FOR HEALTH CARE**

Physicians

#### **LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED**

Individual Clinicians

#### **TARGET POPULATION AGE**

Age greater than or equal to 18 years

#### **TARGET POPULATION GENDER**

Either male or female

#### **STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

## Characteristics of the Primary Clinical Component

### **INCIDENCE/PREVALENCE**

Unspecified

### **ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

### **BURDEN OF ILLNESS**

Unspecified

### **UTILIZATION**

Unspecified

### **COSTS**

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

### **IOM CARE NEED**

Living with Illness

### **IOM DOMAIN**

Effectiveness

## Data Collection for the Measure

### **CASE FINDING**

Users of care only

### **DESCRIPTION OF CASE FINDING**

All patients aged 18 years and older with a diagnosis of end stage renal disease (ESRD) receiving peritoneal dialysis

### **DENOMINATOR SAMPLING FRAME**

Patients associated with provider

### **DENOMINATOR INCLUSIONS/EXCLUSIONS**

**Inclusions**

All patients aged 18 years and older with a diagnosis of end stage renal disease (ESRD) receiving peritoneal dialysis

**Exclusions**

None

**RELATIONSHIP OF DENOMINATOR TO NUMERATOR**

All cases in the denominator are equally eligible to appear in the numerator

**DENOMINATOR (INDEX) EVENT**

Clinical Condition

Encounter

Therapeutic Intervention

**DENOMINATOR TIME WINDOW**

Time window brackets index event

**NUMERATOR INCLUSIONS/EXCLUSIONS****Inclusions**

Patients who have a dialyzer clearance/volume ratio (Kt/V) greater than or equal to 1.7 OR patients who have a Kt/V less than 1.7 with a documented plan of care\* for inadequate peritoneal dialysis at least three times during the 12 month reporting period

\*A documented plan of care may include assessing for non-adherence with the peritoneal prescription, sampling, and collection; assessing for error in the peritoneal dialysis prescription and/or inadequate monitoring of the delivered dose; performing peritoneal equilibrium testing; assessing for inadequate patient education; increasing the exchange volume; increasing the number of exchanges per 24 hours; assessing for modality (continuous ambulatory peritoneal dialysis [CAPD] or continuous cycling peritoneal dialysis [CCPD]).

**Exclusions**

None

**MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

**NUMERATOR TIME WINDOW**

Fixed time period

**DATA SOURCE**

Administrative data  
Medical record

#### **LEVEL OF DETERMINATION OF QUALITY**

Individual Case

#### **PRE-EXISTING INSTRUMENT USED**

Unspecified

### **Computation of the Measure**

#### **SCORING**

Rate

#### **INTERPRETATION OF SCORE**

Better quality is associated with a higher score

#### **ALLOWANCE FOR PATIENT FACTORS**

Unspecified

#### **STANDARD OF COMPARISON**

Internal time comparison

### **Evaluation of Measure Properties**

#### **EXTENT OF MEASURE TESTING**

Unspecified

### **Identifying Information**

#### **ORIGINAL TITLE**

Measure #6: plan of care for inadequate peritoneal dialysis.

#### **MEASURE COLLECTION**

[The Physician Consortium for Performance Improvement® Measurement Sets](#)

#### **MEASURE SET NAME**

[End Stage Renal Disease Physician Performance Measurement Set](#)

**SUBMITTER**

American Medical Association on behalf of the Renal Physicians Association and the Physician Consortium for Performance Improvement®

**DEVELOPER**

Physician Consortium for Performance Improvement®  
Renal Physicians Association

**FUNDING SOURCE(S)**

Unspecified

**COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE**

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**FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST**

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

**ENDORSER**

National Quality Forum

**INCLUDED IN**

## **ADAPTATION**

Measure was not adapted from another source.

## **RELEASE DATE**

2007 Mar

## **MEASURE STATUS**

This is the current release of the measure.

## **SOURCE(S)**

Renal Physicians Association, Physician Consortium for Performance Improvement. End stage renal disease (ESRD) physician performance measurement set. Chicago (IL): American Medical Association; 2007 Mar 9. 27 p. [8 references]

## **MEASURE AVAILABILITY**

The individual measure, "Measure #6: Plan of Care for Inadequate Peritoneal Dialysis," is published in the "End Stage Renal Disease (ESRD) Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: [www.physicianconsortium.org](http://www.physicianconsortium.org).

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## **NQMC STATUS**

This NQMC summary was completed by ECRI Institute on April 28, 2008. The information was verified by the measure developer on June 11, 2008.

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